

Berrien County Physician Standard Report

				2004 Actual			2010 Projected		
Physician Specialty				Pop.	Phys.	/100k	Pop.	Physicians	
Emergency Medicine				16,484	1	6.1	15,229	1	
2	National Physician Standards	Standard Phys/100,000 Pop.		Phys. Need	Status		Phys. Need	Status	
	AMA	9.5		2	Deficit: -1		1	Adequate	0
	Two Mature HMO	5.5		1	Adequate	0	1	Adequate	0
	Adjusted FTE	5.2		1	Adequate	0	1	Adequate	0
	GMENAC	5.4		1	Adequate	0	1	Adequate	0
	Kaiser Portland	6.7		1	Adequate	0	1	Adequate	0
	7 Kaiser Plans	5.3		1	Adequate	0	1	Adequate	0
	GMH Seattle								
	Three HMOs								
	Average Requirement	5.6		1	Adequate	0	1	Adequate	0
				2004 Actual			2010 Projected		
Physician Specialty				Pop.	Phys.	/100k	Pop.	Physicians	
Family Practice				16,484	6	36.4	15,229	7	
5	National Physician Standards	Standard Phys/100,000 Pop.		Phys. Need	Status		Phys. Need	Status	
	AMA	31.3		5	Surplus: 1		5	Surplus: 2	
	Two Mature HMO	45.6		8	Deficit: -2		7	Adequate	0
	Adjusted FTE	42.6		7	Deficit: -1		6	Surplus: 1	
	GMENAC	25.2		4	Surplus: 2		4	Surplus: 3	
	Kaiser Portland	16.7		3	Surplus: 3		3	Surplus: 4	
	7 Kaiser Plans	11.0		2	Surplus: 4		2	Surplus: 5	
	GMH Seattle								
	Three HMOs	9.2		2	Surplus: 4		1	Surplus: 6	
	Average Requirement	25.1		4	Surplus: 2		4	Surplus: 3	
				2004 Actual			2010 Projected		
Physician Specialty				Pop.	Phys.	/100k	Pop.	Physicians	
Internal Medicine				16,484	1	6.1	15,229	2	
8	National Physician Standards	Standard Phys/100,000 Pop.		Phys. Need	Status		Phys. Need	Status	
	AMA	51.4		8	Deficit: -7		8	Deficit: -6	
	Two Mature HMO	21.4		4	Deficit: -3		3	Deficit: -1	
	Adjusted FTE	20.0		3	Deficit: -2		3	Deficit: -1	
	GMENAC	28.8		5	Deficit: -4		4	Deficit: -2	
	Kaiser Portland	28.1		5	Deficit: -4		4	Deficit: -2	
	7 Kaiser Plans	30.3		5	Deficit: -4		5	Deficit: -3	
	GMH Seattle								
	Three HMOs	16.7		3	Deficit: -2		3	Deficit: -1	
	Average Requirement	24.2		4	Deficit: -3		4	Deficit: -2	

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				2004 Actual			2010 Projected		
Physician Specialty				Pop.	Phys.	/100k	Pop.	Physicians	
General Surgery				16,484	1	6.1	15,229	2	
	National Physician Standards	Standard Phys/100,000 Pop.		Phys. Need	Status		Phys. Need	Status	
2	AMA	12.8		2	Deficit:	-1	2	Adequate	0
	Two Mature HMO	9.4		2	Deficit:	-1	1	Surplus:	1
	Adjusted FTE	8.8		1	Adequate	0	1	Surplus:	1
	GMENAC	9.7		2	Deficit:	-1	1	Surplus:	1
	Kaiser Portland	7.0		1	Adequate	0	1	Surplus:	1
	7 Kaiser Plans	6.2		1	Adequate	0	1	Surplus:	1
	GMH Seattle	5.9		1	Adequate	0	1	Surplus:	1
	Three HMOs	4.2		1	Adequate	0	1	Surplus:	1
	Average Requirement	7.3		1	Adequate	0	1	Surplus:	1

Report created by Georgia Board for Physician Workforce, State of Georgia

*Standards are presented as rates per 100,000 population.

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(2) Graduate Medical Education National Advisory Committee Summary Report. 1981. Pub. No. (HRA) 81-651. Washington: Government Printing Office.

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(4) American Osteopathic Association. 1993. 1994 Yearbook and Directory of Osteopathic Physicians. Chicago.

(5) Hart, L., E. Wagner, J. Parzada, A. Nelson, and R. Rosenblat. 1997. Physician Staffing Ratios in Staff- Model HMO's: A Cautionary Tale, Health Affairs 16, no. 1:55-70.

(6) Weiner, J.P. 1994 Forecasting the Effects of Health Reform on U.S. Physician Workforce Requirement. JAMA 272, no. 3:222-230.

(7) Steinwachs, D., J.P. Weiner, S. Shapiro, et al. 1986. A Comparison of the Requirements for Primary Care Physicians in with Projections Made by the Graduate Medical National Advisory Committee. New England Journal of Medicine 314:217-22

(8) Kronick, R., D.C. Goodman, J. Wennberg, and E. Wagner. 1993. The Marketplace in Health Care Reform: The Demographic Limitations of Managed Competition. New England Journal of Medicine 328:1480-152. See also, related NAPS Document 04998.

(9) Vanslow, N.A. The Physician Workforce: Issues for Academic Medical Centers. Forum on the Future of Academic Medicine. December 2, 1996.

(10) Forte, G.J., Dionne, M., Beaulieu, M., and Salsberg, E. Profile of New York State Physicians. Rensselaer, NY: Center for Health Workforce Studies, School of Public Health, SUNY Albany. April 2001.

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